

Work Order ID 93305

93305

Page 1

November-15-12 11:24:54 AM

Item ID: D350-766-015

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Interior Trim, Canopy Post

Stop *NS2*

Start Date: 11/15/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: ML5 Date: 12-11-12 Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
IIN-D350-766	C								
100		0.00							
100	DOCUMENT CONTROL								
DC	Memo	0.00							
Document Control	Photocopy bluefile and create labels per PPP D350-766-015 CHG001								
110	Pick Kit	0.00							
110									
Packaging	Memo	0.00							
Packaging									
120	QC4- 100% Inspect kits for completeness	0.00							
120									
QC	Memo	0.00							
Quality Control									

DAS
15
2-89

12-12-05

2 ML5 12-11-19 (2)

12/18/14

DAS
20
2-89

12/14/19 (2)

DAS
15
2-89

12.12.05

2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 93305

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Page 2

November-15-12 11:24:54 AM

Item ID: D350-766-015

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Interior Trim, Canopy Post

Start Date: 11/15/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Run Start *NR1*

Approvals: Process Plan: Date: Tooling: Date:

Stop *NR2*

QC: Date: SPC (Y/N): Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00

130

Packaging

0.00

Packaging

Memo

Identify and pack for shipping as per PPP D350-766-015

Location: FG 059A

PPP Rev:



82 12/12/05

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

12/12/7

mr

12-12-04

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

November-15-12 11:24:54 AM

Page 1

Work Order ID: 93305
 Parent Item: D350-766-015
 Parent Item Name: Interior Trim, Canopy Post

Start Date: 11/15/12

Required Date: 12/07/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP RevA: New issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3946-1 Panel, Center Post		Manufactured	No			110	Each	1.0000	1				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST150		1							
				92510		1							
D3947-1 Panel, Upper LH Post		Manufactured	No			110	Each	0.0000	1				
D3947-2 Panel, Upper RH Post		Manufactured	No			110	Each	0.0000	1				
D3947-3 Panel, Lower LH Post		Manufactured	No			110	Each	2.0000	1				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST150		2							
				69044		2							
D3947-4 Panel, Lower RH Post		Manufactured	No			110	Each	1.0000	1	1			
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				st151		1							
				92389		1							

~~92388~~ B93550
 SP.
 12-12-4.

92510 1/p
 93033

293034
 293035

B93549
 SP 12-12-4.

92388 1/p

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

4.0 WEIGHT AND BALANCE

The following is the weight increase associated with the Interior Trim Kits. Be sure to subtract the weight of any parts removed.

Installation	Weight	LATERAL		LONGITUDINAL	
		Arm	Moment	Arm	Moment
D350-766-011 Interior Trim Kit (Aft Bulkhead Trim Kit)	13.2 lb 6.0 kg	0 in 0 m	0 in-lb 0 m-kg	113 in 2.87 m	1492 in-lb 17.2 m-kg
D350-766-013 Interior Trim Kit (Ceiling Trim Kit)	11.0 lb 5.0 kg	0 in 0 m	0 in-lb 0 m-kg	91 in 2.31 m	1001 in-lb 11.6 m-kg
D350-766-015 Interior Trim Kit (Canopy Post Trim Kit)	5.2 lb 2.4 kg	0 in 0 m	0 in-lb 0 m-kg	42 in 1.07 m	218 in-lb 2.6 m-kg
D350-766-021 Interior Protector Kit (Aft Baggage Protector Kit)	14.3 lb 6.5 kg	2.77 in 0.07 m	39.6 in-kg 0.46 m-kg	168 in 4.27 m	2402 in-lb 27.8 m-kg

5.0 PARTS LIST

Qty -011	Qty -013	Qty -015	Qty -021	Part Number	Description
X				D350-766-011	INTERIOR TRIM KIT (AFT BULKHEAD TRIM KIT)
	X			D350-766-013	INTERIOR TRIM KIT (CEILING TRIM KIT)
		X		D350-766-015	INTERIOR TRIM KIT (CANOPY POST TRIM KIT)
			X	D350-766-021	INTERIOR PROTECTOR KIT (AFT BAGGAGE PROTECTOR KIT)
1				D3655-1	PANEL
1				D3655-3	PANEL
	1			D3656-1	PANEL
	1			D3656-3	PANEL
			1	D3889-041	PANEL, FLOOR
			1	D3890-041	PANEL, WALL
			1	D3891-041	PANEL, FWD LH
			1	D3891-042	PANEL, FWD RH
			1	D3944-1	PLACARD
			4	D3945-041	BRACKET
				D3946-1	PANEL, CENTER POST
				D3947-1	PANEL, UPPER LH POST
				D3947-2	PANEL, UPPER RH POST
				D3947-3	PANEL, LOWER LH POST
				D3947-4	PANEL, LOWER RH POST
			3	D3948-041	PLATE, ANCHOR
			4	D3948-043	PLATE, ANCHOR
			14	AN525-10R7	SCREW
			4	AN525-10R9	SCREW
2				AN526-1032R12	SCREW
2				AN526-1032R20	SCREW
	15			AN526-1032R9	SCREW
			8	CCR264SS3-2	RIVET
	30			CCR264SS3-3	RIVET
8				CCR274SS3-4	RIVET
			8	CR3213-4-02	RIVET (OR M7885/2-4-02)
			12	CR3523-4-02	RIVET (OR M7885/4-4-02)
			16	CR3523-4-03	RIVET (OR M7885/4-4-03)
4	15		4	MS21059L3	NUTPLATE (OR MS21059-3)

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Revision: C

Date: 09.06.08